# **Campaign Finance Report**

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificati Number :	on 8000	367			Repor Filed			CANDI	DATE		СОМ	MITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		Local 0	712	IBE	W COP	E							-	
Street Address:	217 Sassafras	s Lane															
City:	Beaver						S	tate:	PA			<b>Zip Code:</b> 15009-1709					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2. <b>X</b>		DAY MAR		POST-	- 3.		AMENDMENT REPORT?		Yes	No	y <b>√</b>	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.		DAY CTIC		POST- 6.			TERMIN/ REPORT		Yes	No	° <b>⋎</b>	
report type)	ANNUAL REPORT	7.	<b>Year</b> 2012									PAPER		$\checkmark$	DISKE	TTE	
Name of Office S	Leader Sought by Candida	te:					D	ΑΤΕ Ο	FELE	СТІС	N	District Number	Office Code	Par	ty Code	County	
							M	10	DAY	YI	AR						
								11		6	2012	<b> </b>	(SEE INS	TRUCTI	ONS FOR	CODES)	
	Receipts and	мо	DAY	YEAR	1		M	10	DAY	Y	EAR	FC	R OFFIC	E USE	ONLY		
Expenditures	s from:		3 6	20	012	ГО		4		9	2012						
A. Amount Bro	ught Forward From	n Last R	eport				\$			8,6	597.88						
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	1 Sche	dule I)		\$			1,9	903.60						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			10,0	501.48						
D. Total Expen	ditures (From Sch	edule II	I)				\$			1,2	250.00						
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)			\$			9,3	51.48	-					
F. Value Of In-	Kind Contributions	s Receiv	ed (From S	chedu	le II)		\$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV	/)			\$				0.00						
				AFF	IDAV	IT S	SEC	TION									
	s a Committee rep		-						• •			-					
I swear (or affirm) correct and comple	) that this report, incl ete.	luding the	e attached sc	hedules	s filed or	раре	er or	by elect	ronic m	edium	, are to i	the best o	f my knov	vledge	and beli	ef , true	
Sworn to and subs	cribed before me this day of	5	20							9	Gignature	e of Perso	n Submitt	ing Rep	oort		
	Signatu	re				_						Prin	ted Name				
My Commission Ex	cpires					_						Ema	il				
	мо	D	AY	YR					Are	ea Coo	le	Daytin	e Teleph	one Nu	mber		
Part II- If this is	a report of a cano	didate's	authorized	Comm	nittee, (	Cand	idat	e shall	sign he	ere.							
No 320) as amende		ny knowle	edge and beli	ef this	political	com	nmitt	ee has n	ot viola	ted ar	y provis	ions of th	e act of Ju	ine 3,1	937 (P.I	1333,	
Sworn to and subso	ribed before me this day of		20								S	ignature (	of Candida	ite			
						_						Printe	ed Name				
My Commission Exp	Signature					_						Ema	il				
	мо	D	AY	YR					Area	Code		D	aytime Te	elephon	e Numb	er	

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** Local 0712 IBEW COPE From: <u>3/6/2012</u> **To:** 4/9/2012 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 0.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 1,903.60 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 1,903.60 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 1,903.60 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

PART A

Name of Filing Committee or Candid	Name of Filing Committee or Candidate				Period				
				From:			То:		
		·			DATE			AMOUNT	
Full Name of Contributing Committee			м	10	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4	4)						
							Γ	PAGE TOTAL	

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

0.00

\$

PAGE 3

5/9/2024 2:11:10 PM

PART B ALL OTHER CONTRIBUTIONS \$50.01 TO \$250.00 Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part A)									
Name of Filing Committee or Candidat	e		Rep	orting P	eriod				
	From: To:								
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)							
								PAGE TOTAL	
Enter Grand Total of Part A on S	Schedule I, Detai	led Summary Pag	je, Se	ection 2	2.		\$	0.00	

# PART C Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Reporting	Period				
Local 0712 IBEW COPE			From:	<u>3/</u>	6/2012	То:	<u>4/9/2012</u>	
				DA	TE		Α	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address 217 Sassafras Lane							\$	899.18
<b>City</b> Beaver	<b>State</b> PA	<b>Zip Code</b> 15009	e (Plus 4)	3	30	2012	2	
Full Name of Contributing Committee Local 0712 IBEW COPE				мо	DAY	YEAR		
Mailing Address 217 Sassafras Lane							\$	1,004.42
City Beaver	<b>State</b> PA	<b>Zip Code</b> 15009	e (Plus 4)	4	3	2012	2	
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	lule I, Detailed Sum	imary Pa	ge, Sectio	n 3.			\$	1,903.60

## PART D ALL OTHER CONTRIBUTIONS

### OVER \$250.00

### Use this Part to itemize all other contributions with an aggregate value of

over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate	Reporting Period	
	From:	То:

				D	ATE		АМС	DUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address	Address						\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupation				
Employer Mailing Address/Principal Pl Business	ace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detai	led Sumr	nary Page, Secti	on 3.			PAG	GE TOTAL
	-						\$	0.00

I

### PART E **OTHER RECEIPTS**

**REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.** Use this Part to report refunds received, interest earned, returned checks and

### prior expenditures that were returned to the filer.

Name of Filing Committee or	Candidate		Report	ting Perio	od				
			From: To				:		
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (	Plus 4)						
Receipt Description					1	1			
Enter Grand Total of Part E	on Schodulo I. Dotailog		Section	4				PAGE TOT	AL
Linter Granu Total of Part E		i Suillilai y Page,	Section				\$		0.00

# SCHEDULE II IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

### USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period		
Local 0712 IBEW COPE	From:	<u>3/6/2012</u> To:	<u>4/9/2012</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ſF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD ( amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 1		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

### VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting Period					
			From:			То:		
				DATE		АМО	UNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)	,					
Description of Contribution:								
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

### SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate					Rej	porting P	eriod			
					From: To:					
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
- Mailing Address								\$	0.00	
City	State		Zip Code(	Plus 4)						
Employer of Contributor					Occupation					
Employer Mailing Address/Principal Place of City State			State	Zip Code(Plus Descrip 4)			ption of	Contribution		

		1		
Enter Grand Total of Part G on Schedule I	I. In-Kind Contril	butions Detail	ed	PAGE TOTAL
Summary Page, Section 3.	_,			0.00

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candi	date		Reportin	ng Period					
Local 0712 IBEW COPE			From	<u>3/0</u>	<u>5/2012</u>	То:	<u>4/9/2012</u>		
				DATE			AMOUNT		
To Whom Paid Beaver Lawrence Central Labor Co	uncil		мо	DAY	YEAR				
						-			
Mailing Address P.O. Box A			3 14 2012 <b>\$</b> 500.00						
City Beaver	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	15009	Tickets	and ad for	r banque	t fundrais	ser		
To Whom Paid PA AFL-CIO COPE			мо	DAY	YEAR				
Mailing Address 319 Market Street			3	14	2012	\$	125.00		
City Harrisburg State Zip Code (Plus 4)			Descrip	tion of Exp	) Denditure	<b>ا</b>			
PA 17101			Progam	n ad for ba	nquet fui	ndraiser			
To Whom Paid Friends to elect Bob Williams			мо	DAY	YEAR				
Mailing Address 2219 Neish Ave	enue		3	26	2012	\$	250.00		
City Aliquippa	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	15001	Tickets for fundraiser						
<b>To Whom Paid</b> Friends of Jim Marshall	<u> </u>		мо	DAY	YEAR				
Mailing Address 1220 Shenango	Road		3	26	2012	\$	125.00		
City Darlington	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure	<b>۱</b>			
	PA	16115	1 golfe	r for golf s	cramble	fundraise	r		
<b>To Whom Paid</b> Chris Sainato for State Representa	tive		мо	DAY	YEAR				
Mailing Address 607 Barker Avenue			3	26	2012	\$	250.00		
City New Castle	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure	•			
PA 16101			Tickets for breakfast fundraiser						
							PAGE TOTAL		
Enter Grand Total of Expenditu	nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	1,250.00		